PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notifical	correspondence includir ad below or directed oth tions.	ng the Patent, advance of nerwise in Block 1, by (a) specifying a new corre						_
CURRENT CORRESPOND	par	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.							
21967	7590 11/21	/2006	1147				nicelon		
	VILLIAMS LLP LL PROPERTY DE T, N.W.	I h Sta add trai	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
SUITE 1200			Γ	(Depositor's name				7	
WASHINGTON	, DC 20006-1109							(Signature	3
								(Date	3
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.		
10/812,955 03/31/2004		Scott Alan Noonan	n 52493.000374		000374	4888			
TITLE OF INVENTION			Two same and the party	Tropy DAID ISSUE	BEE TOT	AL PURIO DUE	T	DATE DIE	7
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	PEE TOU	AL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$1400	\$300	. ร 0		\$1700		02/21/2007	
EXAMINER ART UNIT		CLASS-SUBCLASS]						
RAYMOND, EDWARD 2857			702-179000	retent front nage list					_
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys						
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,						
"Fee Address" indication (or "Fee Address" Indication form PTO/SB47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					- -	
			THE PATENT (print or ty						_
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									iT
(A) NAME OF ASSIC		(B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Genworth Fi	nancial Inc.	Richmond, Virginia 23230							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🚨 Government									
ta. The following fcc(s) a	re submitted:	41	b. Payment of Fee(s): (Ple	ase first reapply any	previously	paid issue fee s	hown at	ove)	
Issue Fee		A check is enclosed.							
D Advance Order - #	o small entity discount p	☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0206 (enclose an extra copy of this form).							
CJ Advance Order - A	or copies		overpayment, to Depo	sit Account Number	50-020	6 (enclose an	extra co	py of this form).	_
	us (from status indicated	•	Dr. Amelians is an Inc		ENTERU	C 27 CE	D 1 17/-	\(2\)	
	SMALL ENTITY statu		b. Applicant is no los						<u>-</u>
nterest as shown by the r	ecords of the United Sta	es Patent and Tragemark	d from anyone other than (Office.	me applicant; a regist	ered autorney	or agent, or the	assigne	e or ouser party ii	_
Authorized Signature	(ht "	Date February 21, 2007							
Typed or printed name	Christophe	mer	Registration No. 59,853						
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and tubmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. 30x 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Juder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.									